

shoulder. This is all current news. Again, there is a sense of urgency for us as a government to act and demonstrate our focus on this issue.

Meanwhile, it is reported that the military regime has raided the offices of Suu Kyi's political party, the National League for Democracy, tearing down party flags and padlocking doors all across the country. Reportedly, military intelligence agents are posted outside the offices, preventing any entry at the offices in Rangoon and Mandalay. The regime has placed numerous democracy movement leaders under house arrest, surrounding their homes and severing telephone lines. I mention this again to explain why we are attempting to bring this legislation directly to the floor.

I commend my colleagues for their efforts on behalf of the Burmese people. As the strongest and most free nation in the world, I do believe we have a profound duty to support that struggle for freedom. Again, I am hopeful that we can address it this morning and over the course of the day.

Mr. REID. Will the majority leader yield for a unanimous consent request?

Mr. FRIST. Yes.

Mr. REID. Mr. President, I ask unanimous consent that I be added as a cosponsor of this resolution on Burma with my friend from Kentucky.

The PRESIDING OFFICER. Without objection, it is so ordered.

MEDICARE

Mr. FRIST. Mr. President, let me take a few minutes to comment on what is taking place today in the release of some initial working documents on Medicare modernization by members of the Finance Committee.

Prefacing that, I will say that we have a lot of work to do over the next 3 weeks in order to address an issue that is important to every single American, and that is giving our seniors and individuals with disabilities health care security.

Today there are about 35 million seniors on Medicare and about 5 million individuals with disabilities. We are also speaking to and acting for those soon-to-be seniors in future generations.

I commend my colleagues who have done yeoman's work—Senator BAUCUS and Senator GRASSLEY—and for their commitment to advancing Medicare modernization, strengthening and moving Medicare down the field so we can deliver that health care security to our seniors. The goal is twofold: to strengthen and improve Medicare and, at the same time, provide meaningful prescription drug benefits to seniors and Americans with disabilities.

I recognize it is a huge challenge to address this very complex program but it is one that I know this body is up to, one we have been working very hard on for years, and it is one that I believe we can accomplish in the next 3 weeks in the Senate.

There were a couple of concerns raised in the last several days that I briefly want to mention. First, where are we and why act now? Why can we not wait and put this off? It is driven very much by the demographics of the aging population, where, over the next 30 years, we will have a doubling in the number of seniors; but in terms of workers actually paying into the program itself, that will be falling off continually over time. Thus, we need to take this opportunity while we are adding this prescription drug benefit to modernize the program so seniors and individuals with disabilities will continue to get good care and hopefully improve that care in this environment where we have to address the issues of solvency and sustainability.

The Finance Committee has held over 30 hearings on Medicare over the past 4 years, at least 7 devoted to prescription drug coverage alone. Last Friday, now 4 days ago, the Finance Committee had another hearing to focus very specifically on the proposal put forth by Chairman GRASSLEY and Senator BAUCUS. That was the third committee hearing this year on Medicare.

On Thursday of this week, the day after tomorrow, the Finance Committee will meet in executive session to amend and vote on the Grassley-Baucus proposal. And then the following week, on that Monday, that bill will be brought to the floor of the Senate and will be debated and likely amended in some shape or form over a 2-week period.

We are approaching this issue in a systematic way, in an orderly way, in a way that is reasonable, and in a way that is thoughtful.

Some concerns people are talking about are that Medicare denies some seniors coverage. Let me be clear, we will make sure this coverage is available to every senior everywhere. We will specifically be working to ensure access in rural areas. We will be creating public-private partnerships that will offer choice—again, it is voluntary—but will be offering choice for all seniors in every corner of America.

Secondly, many seniors want the certainty of knowing nothing is going to be taken away from them. Seniors might ask: Do I have to give up what I have now? Are you forcing me into some new system? The answer is no. This is a voluntary program. All of us will be able to look every senior in their eyes and say: You can keep exactly what you have now if that is what you want, if that is what you desire. We will be able for the first time to say there are options that include choices you may not have today in Medicare, such as preventive care, such as chronic disease management.

The fact is the current program is fragmented. It does not provide adequate coverage. I know as a physician and I strongly believe as a policymaker it does not adequately cover preventive care. It does not cover disease manage-

ment or chronic disease management. As we all know, it does not cover outpatient prescription drugs. I do believe good health depends on giving seniors good options, the opportunity to choose the plan that best meets their needs.

I have also heard about Medicare reform proposals relating to HMOs, forcing people into HMOs. This plan does not do that. Simply, this plan does not force anybody into an HMO. It is a voluntary proposal. Some HMOs have performed very well. But the better comparison, instead of looking at HMOs, is the Federal Employee Health Benefits Program. Seniors will have the option to get a plan similar to what we have as Senators, Members of the House, and other Federal employees have. I should add, this program has a longer history than Medicare. We have learned how to improve it, modify it, and make it a better program over the last 40 years.

I close by saying I believe seniors deserve the options that Federal employees have. We know Federal employees are very satisfied with the quality of care they receive. Seniors deserve this opportunity to choose. They deserve the opportunity to obtain care that is more flexible, that is less bureaucratic, and that has less paperwork.

Seniors deserve care that keeps them healthy by incorporating those preventive measures. Seniors deserve care that protects them from catastrophic out-of-pocket expenses. America's seniors should have the ability to see the doctor they choose, even if that doctor is outside the network. America's seniors deserve a system that focuses on their needs to keep them healthy and not just to respond to acute episodic illness.

Since 1965, Medicare has admirably served a generation of America's seniors. We owe tomorrow's seniors no less. That will take a response in this body to give seniors access to the care they truly deserve. I look forward to working with my colleagues to strengthen and improve Medicare over the next few weeks.

RECOGNITION OF THE ACTING MINORITY LEADER

The PRESIDENT pro tempore. The Senator from Nevada is recognized.

Mr. REID. Mr. President, we have conferred with floor staff. Senator MIKULSKI is in the Chamber, and she has a statement regarding prescription drugs. I ask unanimous consent that she have an opportunity to respond to the statement of the Senator from Tennessee and that she be given 7½ minutes to do that. Following that, it is my understanding the leader is looking to vote around 11 o'clock on the Dorgan amendment and that the time after the statement by Senator MIKULSKI will basically be evenly divided. I am not asking unanimous consent. The time will basically be divided between the Senator from North Dakota and whoever opposes his amendment.

My unanimous consent request at this time is that Senator MIKULSKI be recognized for 7½ minutes as in morning business.

The PRESIDENT pro tempore. Without objection, it is so ordered. The Senator from Maryland.

PRESCRIPTION DRUGS

Ms. MIKULSKI. I thank the Chair, and, Mr. President, I thank my colleagues for their courtesy, particularly Senator DORGAN. I am very appreciative.

Mr. President, seniors are facing a crisis, and it is caused by the high cost of prescription drugs. For so many years, Congress has talked about prescription drugs in Medicare.

Let me tell you what my seniors say: Talk, talk, talk. They are fed up with our talk, and they want us to take action. They tell me: You can't talk yourself out of high cholesterol; you need Lipitor. You can't talk your way out of diabetes; you need insulin.

The problem with the Senate, they say, is when all gets said and done, more gets said than gets done. The time for talking is over, and we need to listen to the seniors, to business, and we need to act.

I have been in communities all over Maryland, from diners to boardrooms, listening to seniors who are desperate, listening to their families who want to help their parents and listening to employers in boardrooms who really want to help their retirees but are wondering if they can afford to do so.

Here is what they tell me: Congress must do something about the prescription drug benefit, and they want us to do it now to help our seniors, our families, business, and our economy.

There are several different plans floating around, and a lot of them have wonderful new language: Medicare Choice, Medicare Advantage, et cetera. I am not sure what will happen, but what I know is, we must have a meaningful prescription drug benefit, not just slogans and sound bites, not just something out of the Heritage Foundation, not something out of a think tank, but something that enables seniors to afford the prescription drugs, which they paid for the research to develop.

I have five principles for a prescription drug benefit. These principles are the yardstick by which I am going to measure any proposal.

First, the cornerstone of any prescription drug benefit must be Medicare. It must be in Medicare. It must stay in Medicare. Medicare must be the cornerstone. I am absolutely opposed to the privatization of Medicare either overtly or covertly. Let me repeat, I am absolutely opposed to the privatization of Medicare.

Any prescription drug benefit that has a private insurance component to it must be in addition to a Medicare benefit, not in lieu of a Medicare benefit. It must keep a traditional Medi-

care component to it. Any private insurance program must be an option, and it must not be mandatory.

That goes to my second principle: voluntary. No one should be coerced or forced into a private program or forced to give up coverage if they already have it.

It must be affordable. Benefits must be affordable to business and affordable to seniors. That means a definite premium and a reasonable copayment.

It must be accessible, available to all seniors regardless of where they live, and it must be portable so they can take it with them if they visit their grandchildren in another State.

It must be meaningful and genuine. It must cover the drugs that doctors say they need, not what insurance executive gatekeepers say they are willing to give them.

Let's talk about the meaningful benefit. Congress cannot leave this up to the insurance companies.

We have been down that road in Maryland, and it was a rocky road, not only filled with potholes but with landmines. We had something called Medicare+Choice that turned out to be nothing more than a racket for seniors to be gouged and abandoned in my own State. I am not going to support any more rackets or gimmicks under the illusion of being able to help our seniors. Insurance companies came in. Seniors were going to have choice. They ended up with no choice and no coverage. The companies came in. They took the money from our seniors. Then they said, oh, it is too expensive to do this, and they left town. They left over 100,000 Maryland seniors without coverage. We are not going to go that way.

So I do not trust the insurance companies to be there for the seniors. Getting rid of Medicare by forcing them into this is not going to be the way we go. Medicare is the answer. Medicare is not the problem.

I believe honor thy mother and father is not just a good commandment to live by, it is good public policy to govern by. That is why I feel so strongly about Medicare. Congress created Medicare to provide a safety net for seniors. In 1965, seniors' biggest fear was the cost of hospital care. One heart attack could put a family into bankruptcy. That is what Medicare Part A is all about. Then Congress added Medicare Part B to help seniors pay for doctor visits, an important step to keep seniors healthy and financially secure.

New advances in medicine mean seniors are living longer. New treatments and therapies such as prescription drugs prolong life and maintain quality of life. These costs were not envisioned in 1965.

So as we look at this problem, we need to know that Medicare has served the Nation well. Now we know it is time to expand it to a prescription drug benefit. We have covered hospitalization. We have covered doctor visits. Yet because of the advances in medical science in this country, pre-

scription drugs and medical devices save lives and help manage chronic conditions such as high blood pressure and diabetes. This is what we need to be focusing on. Let's focus on the American people for a change and not on the so-called hollow opportunities of structural reform. It is a problem for middle class families. Families worry about their jobs and the weak economy. They do not know how they are going to take care of their children and their elderly parents.

American businesses are wondering about things such as legacy costs, and small business is wondering how they can afford health insurance as well. A lot of companies want to do the right thing for their employees and retirees. They want to offer comprehensive health care benefits, but they are struggling under the cost. That is why I fought for tax incentives for small businesses to provide health coverage for their employees. But those who supported the tax bill care more about special breaks for Joe Billionaire than about basic health care for families.

Our businesses do not get any help, but their competitors sure do. The playing field is not level. When competitors in other countries do not have to pay for prescription drug coverage because they have a national health care system, in my own State of Maryland this means people are losing jobs in the automobile industry and the steel industry. That is why I fought for tax incentives for small businesses to provide health coverage for their employees, but those who supported the tax bill care more about special breaks for Joe Billionaire than about basic health care for families.

We have to get real, and the first place we have to get real is to have a real prescription drug benefit. The Nation cannot afford to do nothing. Prescription drugs are lifelines to millions of Americans. They enable seniors to prevent and manage disease. Without access to medication, seniors are going to end up with trips to the hospital, longer hospital stays, more visits to emergency rooms.

All the great research done at NIH is meaningless if people cannot afford the cures. It is time to make prescription drug coverage a national priority so we can help our seniors, families, American business, and our economy.

When we stand up for America, we stand up for what America stands for, which is a safety net for our seniors and really helping our families be able to help themselves.

By passing a real prescription drug benefit, Congress will deliver real security to America's seniors. Retirement security means more pension security. Seniors need healthcare security to be at ease in their retirements. In today's world, we cannot have healthcare security without prescription drug coverage. Congress must keep this promise to America's seniors.

I now yield the floor, but if they come in with some more gimmicks, I will not yield the floor in this debate.